OAHU CANDIDATES SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-SUBMIT 1 ORIGINAL AND 2 COPIES

CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT CANDIDATE COMMITTEEPAIG



PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES." SECTION II-TYPE OF REPORT: SECTION I-CANDIDATE AND CANDIDATE COMMITTEE: (See the Schedule of Reporting Dates to complete this section) (a) Candidate Name: Amended First Secon 1st Preliminary Primary 2nd Preliminary Primary **Final Primary** (c) Mailing Address: REPORTING PERIOD Proliminary General Final Election Period 7/1/64 through 9/3/04 Supplemental SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS (Complete Section IV on the Back of this Form Before Completing This Section) **COLUMN B COLUMN A** ELECTION PERIOD² TOTAL TO DATE TOTAL THIS PERIOD 3025.85 Cash on Hand at the Beginning of the Election Period... 3175.85 Cash on Hand at the Beginning of this Reporting Period..... 9396.09 19669.70 Total Receipts (From Line 15)..... 12571.94 Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B)..... 41.09 Total Disbursements (not including Unpaid Expenditures) (From Line 19)..... Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4).... .530.85 10.123.61 Total Loans at the Closing of this Reporting Period..... Total Unpaid Expenditures at the Closing of this Reporting Period..... 1478,72 11602.33 Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8)..... 928, 52 10. Surplus/Deficit (Subtract Line 9 from Line 6)..... I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge. Treasuler Signature Date Candidate Signature

Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of ordy Section I, section II, and Section III of this Disclosure Report.

An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS (If Necessary, Complete Schedules A through E Before Completing This Section)

COLUMN A

MN A COLUMN B
ELECTION PERIOD
IIS PERIOD TOTAL TO DATE

41.09

1519.81

RECEIPTS TOTAL THIS PERIOD 11. Contributions From: 11 (a) Individuals/Other Entities/Noncandidate Committees/Political Parties 11(a) 11(2)(1) Monetary and Non-Monetary Contributions of \$100 or Less..... 921.09 921.09 11(a)(ii) (ii) Monetary and Non-Monetary Contributions of More Than \$100...... 7975.00 8125.00 1 1 (a) (iii) (iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii))..... 8896.09 9046.09 1 (b) Candidate or Candidate's Immediate Family 11610 Monetary and Non-Monetary Contributions of \$100 or Less..... -6-_ 0 -1 T (b) (iii) 500.00 Monetary and Non-Monetary Contributions of More Than \$100..... 500.00 (iii) Subtotal (Add Lines 11(b)(i) and 11(b)(iii) 1 1 (b) (iii) 500.00 500.00 12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)..... 9396.09 9546.09 13. Public Funds and Other Receipts..... 10.123.61 9396.09 15. Total Receipts (Add Lines 12 through 14)..... 19,669.70 DISBURSEMENTS 41.09 41.09 16. Expenditures..... 17. Loans Repaid or Forgiven..... 0 -18. Unpaid Expenditures Paid or Forgiven..... 4109 41:09 19. Subtotal Disbursements (Add Lines 16 through 18)..... 1478,72 20 20. Unpaid Expenditures.....

21. Total Disbursements (Add Lines 19 and 20).....

-	USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW	i
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į	A COMMITTEES/POLITICAL PARTIES	1

CANDIDATE OR CANDIDATE'S IMM

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

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MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

	ID CANDIDATE COMMITTEE NAME:	PAGE	\ OF	7
Mark	ernigan-Friends of Mark Ja	ernigan	1	
DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY	AGGREGATE
CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	CONTRIBUTION THIS PERIOD	ELECTION PERIOD TOTAL TO DATE
	NON-MONETARY CONTRIBUTION		X	· X
76/04	Ethel Andrade P.O. Box 164 Kamuela H 9CF743		£ 100,00	*100,00
76/04	Jomes Stafford. 75-6138 Alli Drive Kailua Kona Hl 96740	:	\$ 500.00	\$500.0O
7/2/04	NON-MONETARY CONTRIBUTION Aloha Insurance Services 75-6722 Kuakini Hwy Kailuakona H1 96740		\$ 100.00	*100.00
7/2/61	□ NON MONETARY CONTRIBUTION Hale Kona Inc GMAC Real Estate 76-625 Kuakini Hwy Kailua Kona H1 96740		\$200 OU	\$300 OO
7/12/64	Donmonetary contribution James Thropp, Jr P.O. Box 346 Parauilo H1 96774		\$100.00	\$ 100. co
2. TOTAL MON	OF MONETARY AND NON-MONETARY CONTRIBUTIONS T ETARY AND NON-MONETARY CONTRIBUTIONS THIS PER The Number of the Disclosure Report 11(a)(ii) or 11(b)	IIOD (Last Page Only) (Transfer total	*1000.00 XX XXX	
			Form	1 CC-5(A) (Rev. 5/99)

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COMMITTEES/POLITICAL PARTIES

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE. CANDIDATE AND CANDIDATE COMMITTEE NAME: PAGE Mark Jerniaan, Friends of Mark. Jerniaan AMOUNT OF CONTRIBUTION OR FOR AGGREGATES OF \$1,000 OR MORE DATE OF FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR FAIR MARKET VALUE OF NON-MONETARY NAME OF EMPLOYER DEPOSIT OF AGGREGATE CONTRIBUTION THIS PERIOD ELECTION PERIOD TOTAL TO DATE NON-MONETARY CONTRIBUTION OCCUPATION IF A DEPENDENT MINOR, ENTER NAME OF PARENT NON-MONETARY CONTRIBUTION Putman D. Clark 75-5722 Kuakini Hwy \$ 200.00 \$200.00 Kailua Kona HI 96740 NON-MONETARY CONTRIBUTION Sue Canter 77-6393 Kupuna St \$500.00 \$500.00 7/2/04 Karlua Kona H196740 NON-MONETARY CONTRIBUTION William White. I 7/2/04 \$200,00 \$200.00 P. O. Box4 East levine CA 92650 NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION 7/19/04 Cal-Kona Produce \$ 100-00 \$100.00 P.O. BOX 16 Kealakekua H1 96790 NON-MONETARY CONTRIBUTION Frank Sayre, DOS P.O. Box 1285 \$ 200.00 \$ 200.00 7/19/04 1200.00 1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page)..... 2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)......

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B,

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STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION C	OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON	FOR THE PURPOSE OF SOLICITING CONTRIBUTI	ONS OR FOR ANY COMME	CIAL PURPOSE.
CANDIDATE AN	ID CANDIDATE COMMITTEE NAME:	· PAGE	3 OF	フ
Mark Je	enigar, Friends of Mark J.	ernson -		
DATE OF DEPOSIT OR RECEIPT OF	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY	AGGREGATE
NON-MONETARY CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	CONTRIBUTION THIS PERIOD	ELECTION PERIOD TOTAL TO DATE
	NON-MONETARY CONTRIBUTION			
7/19/04	G. Torry Causey 74-426 Kealake he Pkwy±16 Kailua Kona HI 96740		₫ 300.00	4 300-00
				1
	NON-MONETARY CONTRIBUTION		7	
7/19/04	Gerald M Lange 73-1300 Kukura Street Kailua Kona HI 96740		150.00	4 160.00
-	NON-MONETARY CONTRIBUTION			
7/19/04	Susan Russell 13-2175 Kaloka Drive Kajlua Kona Hl 96740		4 100.00	4 100.00
	Railua conatti 16 140		1	
	NON-MONETARY CONTRIBUTION		<u> </u>	
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	NON-MONETARY CONTRIBUTION			
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1 CHRTOTAL	OF MONETARY AND NON-MONETARY CONTRIBUTIONS 1	THIS PERIOD IThis Penal	550.00	
2. TOTAL MON	NETARY AND NON-MONETARY CONTRIBUTIONS THIS PER Line Number of the Disclosure Report — 11(a)(ii) or 11(b)	RIOD (Last Page Only) (Transfer total	XXXXXX	

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

Form CC-5(A) (Rev. 5/99)

INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE. OF CANDIDATE AND CANDIDATE COMMITTEE NAME: Mark Jernigan Friends Jer Maan AMOUNT OF FOR AGGREGATES OF \$1,000 OR MORE CONTRIBUTION OR FAIR MARKET VALUE DATE OF DEPOSIT OF NAME OF EMPLOYER OF NON-MONETARY AGGREGATE ELECTION PERIOD TOTAL TO DATE CONTRIBUTION RECEIPT OF NON-MONETARY CONTRIBUTION THIS PERIOD OCCUPATION IF A DEPENDENT MINOR, ENTER NAME OF PARENT NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION Fair Wind Fair Wind 8/9/04 78-6775 # A Hakenawais. \$1000.00 \$1000.00 NON-MONETARY CONTRIBUTION Robert S. McClean 13/9/04 P.O. BOX 3000 \$ 500.00 \$ 500.00 Kailua Kona H1 96745 NON-MONETARY CONTRIBUTION Preston Crowl 8/9/04 P.O. Box 9008 4100.00 \$100.00 Karlua Kana H1 96745 NON-MONETARY CONTRIBUTION 8/9/04 Julie Ann Kaku **4**100.00 \$100.00 D.O. BOX 1921 Kealakekua H196750 NON-MONETARY CONTRIBUTION 18/9/04 4100.00 \$100.00 1800.00 1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page)..... 2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii))..... Form CC-5(A) (Rev. 5/99)

INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A

MONETARY AND NON-MONETARY CONTRIBUTIONS

CANDIDATE COMMITTEE

NO INFORMATION O	R COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON	FOR THE PURPOSE OF SOLICITING	CONTRIBUTIO	NS OR FOR ANY	COMME	CIAL PURPOSE.
	D CANDIDATE COMMITTEE NAME:		AGE	5	OF	7
Mark Je	rnigan Friends of Mark Je	rmican				
		FOR AGGREGATES OF \$1,000 O	R MORE	AMOUNT		
DATE OF DEPOSIT OF	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	NAME OF EMPLOYER		CONTRIBUTE FAIR MARKET	VALUE	.00050478
RECEIPT OF NON-MONETARY CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		OF NON-MONETARY CONTRIBUTION THIS PERIOD		AGGREGATE ELECTION PERIOD TOTAL TO DATE
	☐ NON-MONETARY CONTRIBUTION					
4/-	Cecelia H Miller					
\$19/04	P.O. BOX 1739			\$100.00	0	4 100.00
•	Honokaa H1 96727					
	1107181606 111 10 121					
7	NON-MONETARY CONTRIBUTION			4		
	Thomas C Johnson					And the second s
8/9/04	78-261 Manutai St # 806		[\$100.00	<u> </u>	\$100,00
704	Kaulua Kona H 1 96740			. 100.00		4100,00
	Radios Francis					
7	NON-MONETARY CONTRIBUTION			ù		
81	Raymond Foat					4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
8/9/04	P.O. Bux 384598		ĺ			
104	Warkoloa HI 96738		ĺ	\$100.0	0	\$100.00
	Walkolog 171 16/30	-				
7				<u> </u>		
	I NON-MONETARY CONTRIBUTION Jim Ray		****			
8/9/04	73-1127 Ahikawa St.		***************************************			
104			The second secon	\$ 500.0	20	\$500,00
	Kailua Kona Hl 96740					
7				J.		
K /	□ NON-MONETARY CONTRIBUTION					
8/4/04	Michael C Rossell		ļ			
, 04	1717 Republican Street			\$100.0	0	4100-00
	Honolulu HI 96819					
>				J		J
8/0	NON-MONETARY CONTRIBUTION		Ì			
8/9/04	David M. Davenport 62-2670 Kawauhae Road			4250-	$\wedge v$	€250.00
	Kamula HI 96743			(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	90	-23,00
	ramuce III II II II					
			1	<u>!</u>		
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INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION



BY A MY DEDOCAL COR THE PHIRPOSE OF SOLVETING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

SCHEDULE A

MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

CANDIDATE AN	ID CANDIDATE COMMITTEE NAME:	PAGE	/_ OF	7	
Mark Jernigan, Friends of Mark Jernigan					
DATE OF DEPOSIT OR RECEIPT OF	FUIL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY	AGGREGATE	
NON-MONETARY CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	CONTRIBUTION THIS PERIOD	ELECTION PERIOD TOTAL TO DATE	
	NON-MONETARY CONTRIBUTION				
\$/9/04	Hualalai Realfy D.O. Box 819 Kailua Kona H1 96745		250.00	250.00	
	NON-MONETARY CONTRIBUTION				
			X	X	
<u> </u>	NON-MONETARY CONTRIBUTION				
9/2/64	Kona League of Ropublicantion P.O. Box 3134 Kailua Kona H1 96740	van	/25. <i>∞</i>	125.00	
	NON-MONETARY CONTRIBUTION				
9/2/04	Susan Russell 73-2175 Kabko Drive Kaulua Kana HI 96740		5 <i>0</i> 0∙∞	620.00	
			<u> </u>		
9/2/04	Dean Murphy P.O. Box 1990 Kailua Kona H1 96745		100-00	100.00	
9/2/04	Charles F. Hosley 78-6655 Mamalahoa Huy Holualoa Hl 96725 9735		100.00	100.00	
L			1076.00		
	OF MONETARY AND NON-MONETARY CONTRIBUTIONS		1075.00		
	NETARY AND NON-MONETARY CONTRIBUTIONS THIS PE le Line Number of the Disclosure Report — 11(a)(ii) or 11(k		XXXXX		
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COMMITTEES/POLITICAL PARTIES

CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION C	R COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON	FOR THE PURPOSE OF SOLICITING CONTRIBUTI	ONS OR FOR ANY COMME	ICIAL PURPOSE.
	ID CANDIDATE COMMITTEE NAME:	7 of	7	
Mark 3	Jernique. Friends of Mark	: Jerniano	······································	
DATE OF DEPOSIT OR RECEIPT OF	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY	AGGREGATE
NON-MONETARY CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	CONTRIBUTION THIS PERIOD	ELECTION PERIOD TOTAL TO DATE
	NON-MONETARY CONTRIBUTION		X	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
9/2/04	□ non-monetary contribution Gertrude Endicott 76-7045 Kalura St #105 Kailua Kana H1 96740		200.00	200 වර
9/2/04	Charle Bussell PO.Box 9-1325 Anchorage AK 99509		5 <i>00-0</i> 0	5 <i>00-0</i> 0
9/2/04	MON-MONETARY CONTRIBUTION George Handsis 73-4824 Anini St Kailua Kona H1 96740		500.00	600.00
í	NON-MONETARY CONTRIBUTION		X	X
	NON-MONETARY CONTRIBUTION		<u> </u>	1
1. SUBTOTAL	OF MONETARY AND NON-MONETARY CONTRIBUTIONS T	HIS PERIOD (This Page)	1200.00	
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STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

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	VD CANDIDATE COMMITTEE NAME:	PAGE	OF	1
MarkJ	reenigan, Friends of Mark Je	rnyan		
DATE OF DEPOSIT OR RECEIPT OF	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY	AGGREGATE
NON-MONETARY CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	CONTRIBUTION THIS PERIOD	ELECTION PERCOD TOTAL TO DATE
9/2/04	Derry & Rose Jernigan P.O. Box 785 Tok, Ak 99780		500.00	500.00
	NON-MONETARY CONTRIBUTION			
	NON-MONETARY CONTRIBUTION			<i>*</i>
1. SUBTOTAL (DF MONETARY AND NON-MONETARY CONTRIBUTIONS 1	'HIS PERIOD (This Page)	500,00	
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			Form	CC-5(A) (Rev. 5/99)

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INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

FOR AGGREGATES OF \$1,000 OR MORE AMOUNT OF CONTRIBUTION OR DATE OF FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR DEPOSIT OR RECEIPT OF NAME OF EMPLOYER FAIR MARKET VALUE OF NON-MONETARY AGGREGATE NON-MONETARY CONTRIBUTION ELECTION PERIOD TOTAL TO DATE CONTRIBUTION IF A DEPENDENT MINOR, ENTER NAME OF PARENT OCCUPATION THIS PERIOD NON-MONETARY CONTRIBUTION 76/04 Contributions under \$1000 50.00 50.00 NON-MONETARY CONTRIBUTION 7/9/04 Contributions Under \$100.00 275.00 325.00 NON-MONETARY CONTRIBUTION 18/9/04 Contributions Under \$100.00 550.00 225 00 NON-MONETARY CONTRIBUTION Contributions Under \$10000 650.00 100,00 NON-MONETARY CONTRIBUTION Contributions Under \$100.00 230 On 880.00 NON-MONETARY CONTRIBUTION 880.00 1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page)...... 2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

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 CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE A	ND CANDIDATE COMMITTEE NAME:	PAGE	2 OF	2
DATE OF DEPOSIT OR RECEIPT OF	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY	AGGREGATE
NON-MONETARY CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	CONTRIBUTION THIS PERIOD	TOTAL TO DATE
7/26/04	Contributions Under \$ 100.00 Non Monetary		37.24	37.24
7/30/64	Contributions Under \$100 Non Monetary		3.85	41.09
	NON-MONETARY CONTRIBUTION		\nearrow	
	NON-MONETARY CONTRIBUTION		X	X
	NON-MONETARY CONTRIBUTION		X	X
	NON-MONETARY CONTRIBUTION		X	X
1. SUBTOTAL	OF MONETARY AND NON-MONETARY CONTRIBUTIONS T	THIS PERIOD (This Page)	41.09	
2. TOTAL MON	ETARY AND NON-MONETARY CONTRIBUTIONS THIS PER le Line Number of the Disclosure Report — 11(a)(ii) or 11(b)	RIOD (Last Page Only) (Transfer total	921.09	

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

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STATE OF HAWAII CAMPAICN SPRINDING COMMISSION



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	CANDIDATE COMMITTEE NAME:	PAGE OF	1		
CANDIDATE AND	and Energy of Mark Jemige	a 1			
CANDIDATE AND CANDIDATE COMMITTEE NAME: Mark Jernigan Friends of Mark Jernigan A					
			EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY		
DATE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF	PURPOSE OF EXPENDITURE OR DESCRIPTION OF	CONTRIBUTION THIS PERIOD		
OF EXPENDITURE	VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	NON-MONETARY CONTRIBUTION	, , , , , , , , , , , , , , , , , , ,		
	NON-MONETARY CONTRIBUTION				
7/	Johanna Wiseman	Copies	\$1.67		
7/28/04	74-5615 Luhia St	l of a	,.0,		
. 04	Kailia Kana H1 96746				
	NON-MONETARY CONTRIBUTION				
7.	Johanna Wiseman	1	1 ~~ ~~		
7/28/04	74-5615 Luhia 57	Office Supplies	4 35.57		
	Villa Voma HI 96740				
	Kastra Kona H1 96740				
17.	Johanna Wiseman				
30/04	74-5615 Luhia St.	Postage	\$ 3.85		
109	Kaulus Kona HI 96740	1 3 3 3	A A COURSE OF THE STATE OF THE		
	NON-MONETARY CONTRIBUTION				
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			4109		
1. SUBTOTAL	OF EXPENDITURES THIS PERIOD (This Page)		" "		
2 TOTAL EYE	PENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Num	nber 16 of the Disclosure Report)	41.09		

Form CC-5(B) (Rev. 5/99)

ATTACH A COPY OF THE EXECUTED LOAN DOCUMENT AT THE TIME OF INITIAL DISCLOSURE

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION



NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE CUMMITTEE NAME:		PAGE	\OF		
LOAN SOURCE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF LENDER				
	NAME OF EMPLOYER AND OCCUPATION	AMOUNT OF LOAN AT BEGINNING OF	NEW LOAN AMOUNT	AMOUNT REPAID OR FORGIVEN	AMOUNT OF LOAN AT CLOSING OF
DATE OF LOAN	PURPOSE OF LOAN	THIS PERIOD	THIS PERIOD	THIS PERIOD	THIS PERIOD
CANCIGNATE BAMESUATE FABILLY MINANCIAL INSTITUTION OTHER	Mark Jernigan P.O. Bax 4916 Kailua Kona Hl 96745	10123.61	-0-	FORGIVEN	10.123.61
CANDIDATE RAMEIDATE FAMILY FRUANCIAL INSTITUTION OTHER				FORGIVEN	
C) CANDIDATE C) SAMEDIATE FAMILY C) FRANCIAL (MISTITUTION C) OTHER				FORGIVEN	
CANDIDATE BANGDATE FAMILY PHANGIAL INSTITUTION OTHER				FORGIVEN	
CAMBRIDATE BANGGIATE FARAILY FINANCIAL INSTRUCTION OTHER				FORGIVEN	
1. SUBTOTAL (This Page)				-0-	16,123.61
TOTAL NEW LOANS THIS PERIOD (Last Page Only) (Transfer total to Line Number 14 of the Disclosure Report). TOTAL LOANS REPAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 17 of the Disclosure Report).					
				-0-	
4. TOTAL LOAN	IS AT THE CLOSING OF THIS PERIOD (Last Page Only) (Tra	nsfer total to Line	Number 7 of the Di	isclosure Report)	10,123.61

Form CC-5(D) (Rev. 5/99)

If a loan is forgiven, the loan must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven loan does not have to be reported as an "Expenditure" on Schedule B.

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE E UNPAID EXPENDITURES CANDIDATE COMMITTEE

NOTE: EXPENDITURES ARE CONSIDERED MADE WHEN THE PRODUCT IS DELIVERED OR THE SERVICE IS RENDERED (ACCRUAL METHOD OF ACCOUNTING).

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.						
CANDIDATE AND CANDIDATE COMMITTEE NAME: PAGE OF						
Mark Jernigan, Friends of Mark Jernigan						
DATE OF UNPAID EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR PURPOSE OF UNPAID EXPENDITURE	AMOUNT OF UNPAID EXPENDITURE AT BEGINNING OF THIS PERIOD	NEW UNPAID EXPENDITURE AMOUNT THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD	AMOUNT OF UNPAID EXPENDITURE AT CLOSING OF THIS PERIOD	
	1 1 t = 11 = 1			FORGIVEN		
3/04	Award Center Hawaii 74-6583 Luhia St #A10 Kailua-Kora Yard Signs	- o -	1478.72	-0-	1478.72	
				FORGIVEN		
				FORGIVEN		
				FORGIVEN		
				FORGIVEN		
1. SUBTOTAL (This Page)					1478.72	
2. TOTAL NEW UNPAID EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 20 of the Disclosure Report)						
3. TOTAL UNPAID EXPENDITURES PAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 18 of the Disclosure Report).						
	ID EXPENDITURES AT THE CLOSING OF THIS PERIOD (Las				1478,72	

If an unpaid expenditure is forgiven, the unpaid expenditure must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven unpaid expenditure does not have to be reported as an "Expenditure" on Schedule B.

Form CC-S(E) (Rev. 5/99)